WHY WE DO THIS:  
THE IMPORTANCE OF EARLY LITERACY

What do we want parents to do?
When we think of the reasons for bringing Reach Out and Read into our outpatient clinics, we always think of what we want parents and children to gain. We want:

• Parents to enjoy looking at books with their children and understand why reading aloud is important.

• Parents to know how to read aloud effectively, so that book time is a positive, pleasant, and affectionate episode in the child’s day (and in the parent’s!), and to have a sense of age-appropriate strategies to build the child’s language abilities and pre-reading skills.

• Parents to feel supported by the pediatrician in their aspirations for their children’s cognitive and academic success, and ready and able to play their own important roles in helping that success.

When we think of reading readiness, we often think of the skills taught on Sesame Street: letter naming and letter-sound correspondences, phonemic segmentation (the ability to break up a word into its component sounds, e.g., /ka-at/), and the acquisition of a sight vocabulary (words that can be read directly without sounding them out). These skills do indeed correlate with successfully learning to read. But there are other, more basic, components of very early literacy. These language skills include vocabulary and what is called “decontextualized language,” that is, language used to talk about ideas, or about events distant in time or place. Another fundamental component is the sense that printed words are powerful and important, and that books are sources of pleasure and information. This motivation is crucial, if children are to do the hard work of mastering letters and sounds, and it begins very early in life, as children develop spoken language, and as they are exposed to print in early, affectionate, and positive settings—that is to say, as they hear stories read aloud by their parents.

What is it that we are asking parents to do? To hold young children on their laps, to offer beautiful age-appropriate books, and to engage their children in some back-and-forth dialogue around the words and the images. Reading routines are repeated sequences of interaction between parent and child, in which the parent points out something in the book, asks the child to give a label or description (What’s that? What’s that doggy doing?), the child responds, and the parent gives feedback (Right, he’s playing with a ball!). At its simplest, the routine involves pointing (Parent: “Where’s the doggy?”), at its
most complex, a prediction or explanation (Parent: “Why does that doggy look sad?” “What's going to happen next?”). Whitehurst has coined the phrase “dialogic reading” to describe this back-and-forth process. His research shows that dialogic reading is much more effective in promoting verbal language development than is “regular” reading aloud. Note, therefore, that parents who lack literacy skills can still be very effective readers to their young children.

How can we integrate all this into the well-child visit?

For primary care providers, the key is to combine literacy guidance with other aspects of the exam. To do this well, you want to introduce the book at the beginning of the visit, and use it to build rapport (or distract a fidgety child while taking the history); ideally, you want to use the child’s reaction to the book, and any modeling you do for the parent, as part of a developmental assessment. The ROR provider training is designed to help you integrate the book into your well-child visit, so that literacy promotion becomes part of your standard interaction, assessment, and guidance. To do this, providers will need to be aware of literacy-related milestones—i.e., understand what book-related skills one expects from a six-month-old or a two-year-old. In addition to the curriculum of the provider training, ROR offers handouts and posters on literacy developmental milestones, and developmental code cards (available for medical providers through the ROR National Center or at all trainings) which combine standard developmental milestones with literacy-related milestones.

What if the parent has difficulty reading?

Not all parents will instantly catch on to your literacy advice. If parents have not been read to, it may well feel awkward and uncomfortable. Be aware that a highly prescriptive approach (“You need to read every day or your child will be at risk for failure”) may increase parental anxiety, and make pleasant, relaxed reading even less likely. Most parents have the reading skills to manage a simple picture book. But with low literacy, there often comes a belief that books are something unpleasant, difficult, or tension-producing. On the other hand, low-literate parents may be even more motivated than others to give their children a healthy start towards literacy and we can use that motivation to encourage the parents to read aloud.

Providers need to be thoroughly familiar with local resources for family literacy and adult literacy programs, including the availability of local programs, necessary referral steps, and eligibility requirements. This will allow them to respond to the needs of parents and families, and to seize the moment whenever a parent’s desire to help a child seems to be blocked by the parent’s own limited literacy.
What is early literacy?

In the past, literacy—reading and writing—and language—talking and understanding—were viewed as separate cognitive processes, which developed in a set sequence; that is, children learned to understand and then to speak, then, much later, could be taught to read and then to write. As a result, formal literacy instruction began in school when children were ready, and little pedagogic consideration was given to the importance of children’s books and reading aloud in the home. Early literacy is part of a relatively new (1980s) understanding of how children develop reading, writing, and language skills. According to this understanding, literacy:

• Is a continuous developmental process.
• Includes listening, speaking, reading, and writing.
• Begins prior to formal instruction in reading.
• Develops in real-life settings for real purposes.

It is now understood that literacy development begins early in life and is very much dependent on environmental influences. In other words, we can look at literacy development the same way we look at language development. Important language development takes place before children actually begin talking, and the child’s environment and caretakers play vital roles in encouraging precursors of speech and language. In the same way, young children are not formally taught early literacy skills; these skills emerge when the right kind of stimulation is present in their environment.

The development of literacy skills through early experiences with books and stories is critically linked to children’s later success in learning to read. When children are exposed to books and reading, they develop early literacy skills including basic book-handling abilities, interpreting pictures, following the plot of a story, and associating meaning with the printed word. These early literacy skills become part of the bigger picture of the developmental process of literacy.

Why is it so important for children to be exposed to books and reading from an early age? A 1985 National Commission on Reading study reported that reading aloud to children is the single most important activity for literacy development and eventual reading success. Numerous studies have found that children who are read to from an early age are more successful at learning to read and that early exposure to print is an important part of literacy development. Research on emergent literacy skills in young children found important links between their ability to read and their exposure to literacy experiences prior to school, whether at home, day care, preschool, or Head Start.
Since parents play an important role in their children’s literacy development, they need information, materials, and support to help their children become successful readers. Parents raising children in poverty are less likely to be able to buy books, less likely to have easy access to good books, and more likely to have limited literacy skills themselves. It is especially important to reach these families early and to support the parents as they help their children enter school ready to learn and succeed.

Why early literacy in primary care?
Over the last several decades, the definition of well-child care has evolved to include safety and injury prevention, behavioral pediatrics, language development, and school function. Physicians and nurse-practitioners are frequently the only professionals trained in child development with whom families have regular, one-on-one contact before children enter school. Thus, pediatric primary care providers have a unique opportunity to reach parents and children during these early years: we are already part of an infrastructure which gives us regular, one-on-one, developmentally focused, interviews with the parents of young children. In addition, we have a special relationship on which to build: parents respect the primary care provider’s word and see each check-up and indeed the entire clinic or office as a source of advice, help, support, and healing. As one parent reported, “I knew reading aloud must be important because my doctor said so.”

Promoting literacy in the context of this relationship between parent and health care provider can have a significant impact on parents’ attitudes and behavior. Peer-reviewed studies have documented the effects of pediatric literacy intervention on parent-reported beliefs, attitudes, and activities. Studies have shown that the ROR intervention changes the home environment, with more books available and parents reading aloud more often, and that young children whose families participate in ROR show improved receptive and expressive language.